Case 17-61524 Doc 1 Filed 08/04/17 Entered 08/04/17 15:40:37 Desc Main Document Page 1 of 54

8/04/17 3:37PM

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Sharon	
	your government-issued picture identification (for	First name	First name
	example, your driver's license or passport).	Lee	
	necrise or passporty.	Middle name	Middle name
	Bring your picture	Poe	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	FKA Sharon L Merker FKA Sharon Lee Ewing	
	Include your married or maiden names.	Sharon L Lee	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1210	

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De	btor 1 Sharon Lee Poe		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	788 Old Brook Road	If Debtor 2 lives at a different address:
		Charlottesville, VA 22901 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Albemarle	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other
		in any other district. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

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8/04/17 3:37PM Debtor 1 **Sharon Lee Poe** Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy 7. The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Debtor Relationship to you When Case number, if known District Go to line 12. 11. Do you rent your ☐ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? Yes. No. Go to line 12.

bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

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Dob	otor 1 Sharon Lee Poe				Case number (if known)	8/04/17 3:37PM
Den	otor 1 Sharon Lee Poe				Case Humber (# known)	
Pari	t 3: Report About Any Bu	sinesses	You Own a	s a Sole Proprie	etor	
	Are you a sole proprietor				···	
12.	of any full- or part-time business?	■ No.	Go to P	art 4.		
		☐ Yes.	Name a	nd location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name o	f business, if any	,	
	If you have more than one sole proprietorship, use a		Number	, Street, City, Sta	ate & ZIP Code	
	separate sheet and attach it to this petition.		Check t	he appropriate bo	ox to describe your business:	
	n to time position.				ness (as defined in 11 U.S.C. § 101(27A))	
			_		al Estate (as defined in 11 U.S.C. § 101(51B))	
			_	· ·	defined in 11 U.S.C. § 101(53A))	
			_	•	er (as defined in 11 U.S.C. § 101(6))	
			_	None of the above	- ' ' ' '	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you indi	cate that you are v statement, and	e court must know whether you are a small business debtor so that it can e a small business debtor, you must attach your most recent balance she federal income tax return or if any of these documents do not exist, follo	et, statement of
	For a definition of small	■ No.	I am no	filing under Cha	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filir Code.	ng under Chapter	11, but I am NOT a small business debtor according to the definition in	the Bankruptcy
		☐ Yes.	I am filir	ng under Chapter	11 and I am a small business debtor according to the definition in the B	ankruptcy Code.
Par	t 4: Report if You Own or	Have Any	y Hazardou	s Property or An	ny Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is	_				
	alleged to pose a threat of imminent and	☐ Yes.	What is the	e hazard?		
	identifiable hazard to					
	public health or safety? Or do you own any					
	property that needs immediate attention?			te attention is hy is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is t	he property?		
	игусти герапъ!				Number, Street, City, State & Zip Code	

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Debtor 1 Sharon Lee Poe

Part 5:

Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

....,

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

Αl	oout	De	btoı	2	(Sp	ouse	On	ly i	in	a J	lo	int	C	ase):
----	------	----	------	---	-----	------	----	------	----	-----	----	-----	---	-----	----

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 17-61524 Doc 1 Filed 08/04/17 Entered 08/04/17 15:40:37 Desc Main Document Page 6 of 54 8/04/17 3:37PM Debtor 1 **Sharon Lee Poe** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million estimate your assets to **□** \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million **\$100.001 - \$500.000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a

1519, and 3571. **/s/ Sharon Lee Poe**

Executed on

Sharon Lee Poe Signature of Debtor 1

August 4, 2017

MM / DD / YYYY

bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341,

Signature of Debtor 2

MM / DD / YYYY

Executed on

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Debtor 1 Sharon Lee Poe		Cas	e number (if known)	8/04/17 3:37PM
For your attorney, if you are epresented by one	I, the attorney for the debtor(s) named in this p under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify th	d States Code, and have	explained the relief available un	der each chapter
f you are not represented by in attorney, you do not need o file this page.	342(b) and, in a case in which § 707(b)(4)(D) a in the schedules filed with the petition is incorre		no knowledge after an inquiry th	at the information
. •	/s/ Alexis I. Crow VSB	Date	August 4, 2017	
	Signature of Attorney for Debtor		MM / DD / YYYY	
	Alexis I. Crow VSB			
	Printed name			
	Alexis I. Crow, VSB #27042			
	Firm name			
	684 Berkmar Circle			
	Charlottesville, VA 22901			
	Number, Street, City, State & ZIP Code			
	Contact phone (434) 295-5333	Email address	alexis@alexiscrowlaw	.com

#27042Bar number & State

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			Docum	eni Page 6 01 54		8/04/17 3:37PM
Fill	in this inform	ation to identify your	case:			
Deb	otor 1	Sharon Lee Poe First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Ban	kruptcy Court for the:	WESTERN DISTRICT	OF VIRGINIA		
	se number				_	neck if this is an nended filing
Su Be a	mmary of as complete ar rmation. Fill o	nd accurate as possib ut all of your schedul	le. If two married peoples first; then complete t	nd Certain Statistical Information e are filing together, both are equally respons the information on this form. If you are filing a calc the box at the top of this page.	ible for sup	
Par	t 1: Summa	rize Your Assets				
						ır assets ue of what you own
1.	Schedule A/ 1a. Copy line	B: Property (Official Fo	orm 106A/B) om Schedule A/B		\$	0.00
	1b. Copy line	62, Total personal prop	perty, from Schedule A/B		\$	198,830.23
	1c. Copy line	63, Total of all property	on Schedule A/B		\$ _	198,830.23
Par	t 2: Summa	rize Your Liabilities				
						ur liabilities ount you owe
2.			aims Secured by Propert nn A, Amount of claim, a	y (Official Form 106D) t the bottom of the last page of Part 1 of <i>Schedul</i> e	e D \$ _	15,856.00
3.			Unsecured Claims (Official) 1 (priority unsecured clain	al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part	2 (nonpriority unsecured	claims) from line 6j of Schedule E/F	\$	23,164.64
				Your total liabil	ities \$	39,020.64
Par	t 3: Summa	rize Your Income and	Expenses			
4.		our Income (Official Fo		le I	\$	2,451.58
5.	Schedule J: 'Copy your me	Your Expenses (Official onthly expenses from li	Form 106J) ne 22c of Schedule J		\$_	2,428.29
Par	t 4: Answer	These Questions for	Administrative and Stat	tistical Records		
6.	-		er Chapters 7, 11, or 133 on this part of the form. 0	Pheck this box and submit this form to the court w	vith your othe	er schedules.

- Yes
- 7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Document

Deb	tor 1	Sharon Lee Poe	Case number (If known)	
8.		the Statement of Your Current Monthly Income: Cop-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 L		\$ 3,427.17

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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						8/04/17 3:37PI
Fill in this infor	mation to identify your case	and this filing:				
Debtor 1	Sharon Lee Poe					
Debtor 2	First Name	Middle Name	Last Name			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the: WES	TERN DISTRICT OF	· VIRGINIA			
O					_	
Case number __						Check if this is an amended filing
						3
Official Ec	orm 106A/B					
_						
Scheau	e A/B: Propert	<u>y </u>				12/15
fits best. Be as	separately list and describe items. complete and accurate as possibl ded, attach a separate sheet to th	e. If two married people	e are filing together, both are equ	ally responsible for supplyin	g corre	ect information. If
Part 1: Describe	Each Residence, Building, Land,	or Other Real Estate Y	ou Own or Have an Interest In			
De veu euro er	have any large as a suitable interes	at in any real dance. but	ilding land or similar property?			
. Do you own or	have any legal or equitable interes	st in any residence, bui	iding, iand, or similar property?			
No. Go to Pa	rt 2.					
☐ Yes. Where	is the property?					
Part 2: Describe	Your Vehicles					
□ No ■ Yes 3.1 Make:	Nissan	Who has an intere	st in the property? Check one	Do not deduct secured		
Model:	Sentra	■ Debtor 1 only		the amount of any secur Creditors Who Have Cla		
Year:	2015	Debtor 2 only		Current value of the	Cu	rrent value of the
	te mileage: 28,000	Debtor 1 and De	,	entire property?	ро	rtion you own?
Other infor	rle County 2017 tax		he debtors and another			
assesse Location	d value: \$9700 n: 788 Old Brook Road, esville VA 22901	Check if this is (see instructions)	community property	\$9,700.00		\$9,700.00
•	ircraft, motor homes, ATVs a ats, trailers, motors, personal w					

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Debtor 1	Sharon Lee Poe					Case nu	mber (if known)		8/04/17 3:37PM
Exam □ No	ehold goods and furnis ples: Major appliances, s. Describe		china, kitchenware	÷					
		ttress cation: 788 Old	d Brook Road, (Charlot	tesville VA	22901			\$200.00
	TV co Kit kit	/cabinet, desk rner stand/lam chen: Dishes, chen appliance	uch, recliner, 2 (\$300); Master p (\$100); Dining pots and pans es (\$75); d Brook Road, (bedroo g room: , flatwa	om: Bed fra : Table/3 cl are, cooking	me, 2 dresse nairs (\$25); j utensils, sn	ers,		\$200.00
□ No	ples: Televisions and ra including cell phor				ment; comput	ers, printers, so	anners; music	collections; ele	ctronic devices
		II phone, table cation: 788 Old	t d Brook Road, (Charlot	tesville VA	22901			\$125.00
Exam □ No	s. Describe	memorabilia, colle					cts; stamp, coi	n, or baseball c	ard collections;
Exam _i ■ No	ment for sports and hoples: Sports, photograph musical instrumen	obbies nic, exercise, and					os, skis; canoes	and kayaks; ca	arpentry tools;
■ No	mples: Pistols, rifles, sho	otguns, ammunitio	on, and related eq	uipment					
☐ No	mples: Everyday clothes s. Describe Us	ed personal w	earing apparel						
	Lo	cation: 788 Old	d Brook Road, (Charlot	tesville VA	22901			\$50.00
☐ No	<i>mples:</i> Everyday jewelry	, costume jewelry	r, engagement ring	gs, wedd	ing rings, heir	loom jewelry, w	atches, gems,	gold, silver	

Official Form 106A/B Schedule A/B: Property page 2

Docu	ument Page 12 of 54	
e Poe	Case number (if ki	8/04/17 3:37PM nown)
Misc jewelry Location: 788 Old Brook Re	oad, Charlottesville VA 22901	\$150.00
s, birds, horses		
2 regular dogs Location: 788 Old Brook Re	oad, Charlottesville VA 22901	\$2.00
and household items you did not a	already list, including any health aids you did not	list
		\$728.00
ancial Assets		
	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		r petition
	Cash Location: 78 Old Brook Road, Charlottesv e VA 22901	
		erage houses, and other similar
	Institution name:	
17.1.	UVA Community CU Checking & Savings Location: 788 Old Brook Road, Charlottes VA 22901	ville Unknown
17.2.	Prepaid bank card (Kroger) Location: 788 Old Brook Road, Charlottes VA 22901	ville \$664.68
s, or publicly traded stocks ds, investment accounts with brokera	age firms, money market accounts	
Institution or issuer name	э:	
stock and interests in incorporate	ed and unincorporated businesses, including an in	nterest in an LLC, partnership,
	Misc jewelry Location: 788 Old Brook R s, birds, horses 2 regular dogs Location: 788 Old Brook R and household items you did not a information e of all of your entries from Part 3 at number here	Misc jewelry Location: 788 Old Brook Road, Charlottesville VA 22901 and household items you did not already list, including any health aids you did not information e of all of your entries from Part 3, including any entries for pages you have attached at number here

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	Case 17-61524	Doc 1	Filed 08/04/17 Document	Entered 08/04/17 15: Page 13 of 54	40:37 E	Desc Main 8/04/17 3:37PM
Debtor 1	Sharon Lee Poe			Case number	er (if known)	0/04/17 3.371 W
	Nam	e of entity:		% of owner	ship:	
Negor Non-r ■ No	negotiable instruments are the	ersonal check nose you canr	s, cashiers' checks, pro	negotiable instruments omissory notes, and money orders. by signing or delivering them.		
Exam □ No -	ment or pension accounts uples: Interests in IRA, ERIS List each account separate	A, Keogh, 401	1(k), 403(b), thrift savin	gs accounts, or other pension or pr	ofit-sharing pla	ans
		f account:	Institution	name:		
	Profit-	-Sharing Pla	- balance	ent - Employee Stock Owners e as of 12/31/2015 : 788 Old Brook Road, Charld I		\$186,614.55
Your s Exam □ No		you have ma	rent, public utilities (ele Institution Sec dep estimate	: 788 Old Brook Road, Charlo	ions companie	ss, or others
■ No □ Yes.	lssuer name	and descripti	ion.	or life or for a number of years) ogram, or under a qualified state	e tuition prog	ram.
26 U.S ■ No	.C. §§ 530(b)(1), 529A(b), a	ind 529(b)(1).				
				the records of any interests.11 U.S.		
■ No	•		rty (other than anythi	ng listed in line 1), and rights or	powers exerc	isable for your benefit
	. Give specific information a					
Exam ■ No	ts, copyrights, trademarks	s, websites, p				
27. Licens <i>Exam</i> No	ses, franchises, and other ples: Building permits, exclusion.	general intar usive licenses,		on holdings, liquor licenses, profess	sional licenses	
Money or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

	Case 17-61524 Do	oc 1 Filed 08/04/17 Document	Entered 08/04 Page 14 of 54	4/17 15:40:37	Desc Main 8/04/17 3:37PM
Debtor 1	Sharon Lee Poe			ase number (if known)	0/04/17 3.3/FWI
28. Tax re □ No	efunds owed to you				
■ Yes	. Give specific information about	them, including whether you alre	eady filed the returns ar	nd the tax years	
		2017 tax refunds (2016 F State \$2)- \$1068 tota Location: 788 Old B Charlottesville VA 2	al rook Road,		\$630.00
Exam ■ No	y support nples: Past due or lump sum alimo	ony, spousal support, child supp	ort, maintenance, divor	ce settlement, propert	y settlement
Exam	amounts someone owes you nples: Unpaid wages, disability instable benefits; unpaid loans you of the control of		efits, sick pay, vacatior	n pay, workers' compe	ensation, Social Security
31. Intere Exam □ No	ests in insurance policies apples: Health, disability, or life insurance company o		(HSA); credit, homeowr	ner's, or renter's insura	nce
■ Yes	. Name the insurance company o Company		Beneficiar	y:	Surrender or refund value:
	Location	e ins thru employer n: 788 Old Brook Road, esville VA 22901			\$1.00
If you some	nterest in property that is due you are the beneficiary of a living true cone has died. Give specific information			currently entitled to rec	eive property because
		Property of any kind receivinheritance, devise, beque after filing bankruptcy peti Location: 788 Old Brook R	est, or otherwise with	thin 180 days	\$1.00
Exam ■ No	as against third parties, whether apples: Accidents, employment displayed. Describe each claim			for payment	
■ No	contingent and unliquidated cl	laims of every nature, includin	ng counterclaims of th	e debtor and rights t	o set off claims
■ No	nancial assets you did not alrea	ady list			
☐ Yes	. Give specific information			ı	
	the dollar value of all of your e Part 4. Write that number here	, ,			\$188,312.23

Official Form 106A/B Schedule A/B: Property page 5

Case 17-61524 Doc 1 Filed 08/04/17 Entered 08/04/17 15:40:37 Document Page 15 of 54 8/04/17 3:37PM Debtor 1 **Sharon Lee Poe** Case number (if known) Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership □ No Yes. Give specific information....... Prior homestead deed (2003) - Albemarle County \$90.00 Location: 788 Old Brook Road, Charlottesville VA 22901 54. Add the dollar value of all of your entries from Part 7. Write that number here \$90.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$9,700.00 57. Part 3: Total personal and household items, line 15 \$728.00 58. Part 4: Total financial assets, line 36 \$188,312.23 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$90.00 Total personal property. Add lines 56 through 61... \$198,830.23 Copy personal property total \$198,830.23

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$198,830.23

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8/04/17	3-37DM

						8/04/17 3:37PM
FIII	in this inforn	nation to identify your cas	se:			
Del	btor 1	Sharon Lee Poe				
Dal	btor 2	First Name	Middle Name	L	ast Name	
	ouse if, filing)	First Name	Middle Name	L	ast Name	
Uni	ited States Bar	nkruptcy Court for the: V	VESTERN DISTRICT OF V	'IRGII	NIA	
Cas	se number					
	nown)					☐ Check if this is an amended filing
∩f	ficial Fo	rm 106C				
			erty You Cla	im	as Evemnt	4/16
<u> </u>	SHEGUIR	c. The Prop	berty rou cia		1 as Exempt	4/16
he need and	property you list ded, fill out and case number	sted on Schedule A/B: Propd attach to this page as ma (if known).	perty (Official Form 106A/B) ny copies of <i>Part 2: Additio</i>) as yo nal Pa	our source, list the property that you age as necessary. On the top of any	or supplying correct information. Using u claim as exempt. If more space is y additional pages, write your name
spe any func exe	cific dollar an applicable st ds—may be u mption to a p	nount as exempt. Alternat atutory limit. Some exem nlimited in dollar amount	ively, you may claim the f ptions—such as those for . However, if you claim ar	iull fa r heal n exei	ir market value of the property be th aids, rights to receive certain ∣ mption of 100% of fair market val	One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the it, your exemption would be limited
Par	it 1: Identif	y the Property You Claim	as Exempt			
1.	Which set of	exemptions are you clair	ning? Check one only, eve	en if yo	our spouse is filing with you.	
	■ You are cla	aiming state and federal no	nbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	_	aiming federal exemptions.			0.0.3 0==(0)(0)	
2			3 (),()	mnt	fill in the information below	
۷.			•		fill in the information below.	On a lift a larger that all any assessment and
		on of the property and line on hat lists this property	portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Living roon	n: Couch, recliner, 2	Schedule A/B		¢200.00	Va. Code Ann. § 34-26(4a)
	lamps, plan	t stands, side table,	\$200.00	_	\$200.00	74. 5546 74III. 3 54 25(44)
	bedroom: I corner stan room: Tabl Dishes, pot cooking ute	desk (\$300); Master Bed frame, 2 dressers, d/lamp (\$100); Dining le/3 chairs (\$25); Kitches and pans, flatware, ensils, sm nedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	
	Cell phone,	tablet 88 Old Brook Road,	\$125.00		\$125.00	Va. Code Ann. § 34-26(4a)
	Charlottesv	rille VA 22901 nedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	Angels, ani		\$1.00		\$1.00	Va. Code Ann. § 34-4
		88 Old Brook Road, rille VA 22901			100% of fair market value, up to	
		nedule A/B: 8.1			any applicable statutory limit	
		nal wearing apparel	\$50.00		\$50.00	Va. Code Ann. § 34-26(4)
		88 Old Brook Road, rille VA 22901		_	100% of fair market value, up to	
		nedule A/B: 11.1		_	any applicable statutory limit	

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Misc jewelry Location: 788 Old Brook Road,	\$150.00		\$150.00	Va. Code Ann. § 34-4
Charlottesville VA 22901			100% of fair market value, up to	
Line from Schedule A/B: 12.1			any applicable statutory limit	
2 regular dogs	\$2.00		\$2.00	Va. Code Ann. § 34-26(5)
Location: 788 Old Brook Road,		_	<u>.</u>	
Charlottesville VA 22901			100% of fair market value, up to	
Line from Schedule A/B: 13.1			any applicable statutory limit	
Cash	\$400.00		\$400.00	Va. Code Ann. § 34-4
Location: 788 Old Brook Road, Charlottesville VA 22901			4000/ - 111-1	
Line from Schedule A/B: 16.1		ш	100% of fair market value, up to any applicable statutory limit	
UVA Community CU Checking &	Unknown	_	Unknown	Va. Code Ann. § 34-4
Savings	Olikilowii	-		•
Location: 788 Old Brook Road,			100% of fair market value, up to	
Charlottesville VA 22901 Line from Schedule A/B: 17.1			any applicable statutory limit	
Prepaid bank card (Kroger)	****		ФСС4 CQ	Va. Code Ann. § 34-4
Location: 788 Old Brook Road,	\$664.68	_	\$664.68	tai coac / iiiii g c · ·
Charlottesville VA 22901 Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Profit-Sharing Plan: Retirement -	\$186,614.55		\$186,614.55	Va. Code Ann. § 34-34
Employee Stock Ownership Plan - balance as of 12/31/2015			100% of fair market value, up to	
Location: 788 Old Brook Road,			any applicable statutory limit	
Charlottesville VA 22901				
Line from Schedule A/B: 21.1				
Sec dep w landlord (pet deposit)	\$1.00		\$1.00	Va. Code Ann. § 34-4
(\$500 estimated) Location: 788 Old Brook Road,			100% of fair market value, up to	
Charlottesville VA 22901		_	100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: 22.1			, spp	
2017 tax refunds (2016 Fed refund	\$630.00		\$630.00	Va. Code Ann. § 34-4
\$1066; State \$2)- \$1068 total Location: 788 Old Brook Road,			100% of fair market value, up to	
Charlottesville VA 22901 Line from Schedule A/B: 28.1			any applicable statutory limit	
LINE HOTH Scriedule A/D. 20.1				
Term life ins thru employer Location: 788 Old Brook Road,	\$1.00		\$1.00	Va. Code Ann. § 34-4
Charlottesville VA 22901			100% of fair market value, up to	
ine from Schedule A/B: 31.1			any applicable statutory limit	
Property of any kind received from	\$1.00		\$1.00	Va. Code Ann. § 34-4
any source through inheritance, devise, bequest, or otherwise within	· · · · · · · · · · · · · · · · · · ·		100% of fair market value, up to	
180 days after filing bankruptcy			any applicable statutory limit	
petition Location: 788 Old Brook Road,				
Charlottesville VA 22901				
Line from Schedule A/B: 32.1				

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.			
Prior homestead deed (2003) - Albemarle County	\$90.00	\$90.00		Va. Code Ann. § 34-4	
Location: 788 Old Brook Road, Charlottesville VA 22901 Line from Schedule A/B: 53.1			100% of fair market value, up to any applicable statutory limit		
Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?					
□ No					
☐ Yes					

3.

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						0/U4/17 3.37PW
Fill in this informa	tion to identify you	ır case:				
Dobtor 1	Charan Las Das					
Debtor 1	Sharon Lee Poe	Middle Name	Last Name			
Debtor 2	Thot Name	Wildele Halle	Last Hamo			
(Spouse if, filing)	First Name	Middle Name	Last Name		-	
, ,						
United States Bank	ruptcy Court for the:	WESTERN DISTRICT OF VIRG	INIA			
C						
Case number					☐ Check	if this is an
(ii kilowii)					_	led filing
					amend	ieu iiiiig
Official Form	106D					
Schedule D): Creditors	Who Have Claims S	Secured	by Propert	У	12/15
Da an annulate and a			h - 4h			
		two married people are filing together, number the entries, and attach it to this				
known).		,				,
1. Do any creditors ha	ve claims secured by	your property?				
☐ No. Check the	nis box and submit t	his form to the court with your other s	schedules. Yo	ou have nothing else	to report on this form.	
_		•		a nave neumig elec	10 10 10 11 11 11 11 11 11 11 11	
■ Yes. Fill in a	Il of the information	below.				
Part 1: List All S	Secured Claims					
2. List all secured cla	ims. If a creditor has m	nore than one secured claim, list the creditor	or separately for	. Column A	Column B	Column C
each claim. If more the	an one creditor has a p	articular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
as possible, list the cla	ims in alphabetical orde	der according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion
2.1 Capital One	Auto	Describe the property that secures the	e claim:	\$14,531.00	\$9,700.00	If any \$4,831.00
Creditor's Name		2015 Nissan Sentra 28,000 m		Ψ. 1,001100	40,1.00.00	4 1,00 1100
		Albemarle County 2017 tax	iies			
		assessed value: \$9700				
		Location: 788 Old Brook Roa	4			
		Charlottesville VA 22901	u,			
000 N D III	. 51	As of the date you file, the claim is: Ch	eck all that			
390 N Dalla	•	apply.				
Plano, TX 7	5093	☐ Contingent				
Number, Street, Ci	ity, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mo	ortgage or secur	red		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debte	or 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
☐ At least one of the	debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this clain	n relates to a	<u> </u>	PMSI			
community debt						
Date debt was incurre	ed 12/30/2016	Last 4 digits of account numbe	r <u>4989</u>			
2.2 Syncb/Matti				¢4 20E 00	£200 00	¢4 40E 00
warenouse		Describe the property that secures the	e claim:	\$1,325.00	\$200.00	\$1,125.00
Creditor's Name		Mattress				
		Location: 788 Old Brook Roa	d,			
		Charlottesville VA 22901				
POB 965036	6	As of the date you file, the claim is: Ch apply.	eck all that			
Orlando, FL	. 32896	☐ Contingent				
	ity, State & Zip Code	☐ Unliquidated				
,		☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
_	= -	☐ An agreement you made (such as mo	ortnane or secur	-ed		
■ Debtor 1 only		car loan)	ongage or secul			
Debtor 2 only		_				
Debtor 1 and Debtor	•	Statutory lien (such as tax lien, mech	anıc's lien)			
☐ At least one of the	deptors and another	Judgment lien from a lawsuit				

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Debtor 1 Sharon Lee Poe		Case number (if know)
First Name Middle Nar	me Last Name	·
☐ Check if this claim relates to a community debt	Other (including a right to offset)	PMSI
Date debt was incurred 11/6/2016	Last 4 digits of account numbe	er <u>1956</u>
Add the dollar value of your entries in Col If this is the last page of your form, add th Write that number here: Part 2: List Others to Be Notified for	e dollar value totals from all pages.	\$15,856.00 \$15,856.00
to collect from you for a debt you owe to so	meone else, list the creditor in Part 1, a	ebt that you already listed in Part 1. For example, if a collection agency is trying and then list the collection agency here. Similarly, if you have more than one lere. If you do not have additional persons to be notified for any debts in Part 1,
Name, Number, Street, City, State & Zip Capital One Auto Fin POB 60511 City of Industry, CA 91716-09		On which line in Part 1 did you enter the creditor? Last 4 digits of account number

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				3			
						1	8/04/17 3:37PM
Fill in th	is information to identify you	ur case:					
Debtor 1	Sharon Lee Poe	_					
	First Name	Middle N	lame	Last Name			
Debtor 2 (Spouse if, t	filing) First Name	Middle N	Jame	Last Name			
	3,						
United S	tates Bankruptcy Court for the	: WESTERN	DISTRICT OF VIR	GINIA			
Case nur	mber						
(if known)			_				Check if this is an
							amended filing
O((;-;-	I == 400=/=						
	I Form 106E/F						4044
	ule E/F: Creditors plete and accurate as possible. U						12/15
D: Credito	 Executory Contracts and Uners Who Have Claims Secured by uation Page to this page. If you h known). 	Property. If more	space is needed, co	py the Part you	u need, fill it out, number the	entries in the	boxes on the left. Attach
Part 1:	List All of Your PRIORITY	Unsecured Cla	ims				
1. Do an	y creditors have priority unsecu	red claims agains	st you?				
■ No	o. Go to Part 2.						
□Y€	es.						
Part 2:	List All of Your NONPRIOR	RITY Unsecured	d Claims				
3. Do an	y creditors have nonpriority uns	ecured claims ag	ainst you?				
Пис	o. You have nothing to report in this	s part. Submit this f	form to the court with v	our other sche	dules		
■ Ye		, parti Gaziiii ano i	om to the ocur man,		44.00.		
	II of your nonpriority unsecured list the creditor separately for each						
credite	or holds a particular claim, list the o	other creditors in P	art 3.If you have more	than three non	priority unsecured claims fill ou	t the Continua	
							Total claim
	ARS National Services		Last 4 digits of acc	ount number	0366		\$1,700.64
	Nonpriority Creditor's Name		When was the debt	incurred?	Various		
	Escondido, CA 92046-904	16	When was the debt	iliculteu:	Various		
	lumber Street City State Zlp Code		As of the date you f	ile, the claim i	s: Check all that apply		
V	Vho incurred the debt? Check on	e.	☐ Contingent				
	Debtor 1 only		☐ Unliquidated				
[Debtor 2 only		_ ·				
[Debtor 1 and Debtor 2 only		☐ Disputed Type of NONPRIOR	ITV unsecured	l claim:		
	At least one of the debtors and a	another	Student loans	iii unsecured	d Claiiii.		
	Check if this claim is for a co			na out of a sone	ration agreement or divorce that	at you did not	
	s the claim subject to offset?		report as priority clair		ration agreement of divorce the	at you did 110t	
	■ No		☐ Debts to pension	or profit-sharin	g plans, and other similar debts	3	
	⊒ Yes		Other. Specify	Collection	- Comenity Capital Ba	nk	
	00		Otner. Specify		James Jupital Bal		

Best Case Bankruptcy

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Document Page 22 of 54 8/04/17 3:37PM Debtor 1 Sharon Lee Poe Case number (if know) 4.2 Capital One Last 4 digits of account number \$5,502.00 Nonpriority Creditor's Name **POB 30281** When was the debt incurred? 12/30/2016 Salt Lake City, UT 84130-0281 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer credit ☐ Yes 4.3 \$1,159.00 Portfolio Recovery Last 4 digits of account number 3517 Nonpriority Creditor's Name When was the debt incurred? 120 Corporate Blvd **Various** Norfolk, VA 23502 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection - Synchrony Bank ☐ Yes 9014,8024,6 Sentara Martha Jefferson Hosp \$2,320.00 4.4 Last 4 digits of account number 729 Nonpriority Creditor's Name POB 759132 When was the debt incurred? **Various** Baltimore, MD 21275-9132 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent

Debtor 1 only Debtor 2 only

☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt Is the claim subject to offset?

■ No ☐ Yes ■ Unliquidated ☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Medical debt Other. Specify

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Document Page 23 of 54 8/04/17 3:37PM Debtor 1 Sharon Lee Poe Case number (if know) 4.5 Syncb/Carecredit Last 4 digits of account number \$2,657.00 Nonpriority Creditor's Name POB 965036 When was the debt incurred? 9/20/2012 Orlando, FL 32896-5036 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Consumer credit ☐ Yes 4.6 Syncb/TJX Co PLCC \$1,010.00 Last 4 digits of account number 3517 Nonpriority Creditor's Name POB 965015 When was the debt incurred? 12/1/2013 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Consumer credit 4.7 Syncb/ToysRUS Last 4 digits of account number 1102 \$26.00 Nonpriority Creditor's Name POB 965001 When was the debt incurred? 4/30/2017 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only

Debtor 2 only Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt Is the claim subject to offset?

■ No ☐ Yes ■ Unliquidated ☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Consumer credit

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Debtor	1 Sharon Lee Poe		Case number (if know)	
4.8	Syncb/Walmart Nonpriority Creditor's Name	Last 4 digits of account number	5548	\$724.00
	POB 965024	When was the debt incurred?	2/7/2016	
	Orlando, FL 32896-5024			•
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community deb Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Furniture		-
4.9	UVA Community Credit Union	Last 4 digits of account number	4883	\$8,066.00
	Nonpriority Creditor's Name			Ψο,σσοίσσ
	3300 Berkmar Drive Charlottesville, VA 22901	When was the debt incurred?	3/21/2013	-
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:	
	\square At least one of the debtors and another	☐ Student loans		
	\square Check if this claim is for a community deb	t	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	I	
Part 3:	List Others to Be Notified About a De	ot That You Already Listed		
trying more	is page only if you have others to be notified ak to collect from you for a debt you owe to some than one creditor for any of the debts that you I ebts in Parts 1 or 2, do not fill out or submit this	one else, list the original creditor in Pa isted in Parts 1 or 2, list the additional o	rts 1 or 2, then list the collection agency here	e. Similarly, if you have
		On which entry in Part 1 or Part 2 did you		
	Mountain Capital Fhoreau Drive #100		Part 1: Creditors with Priority Unsecured Clair	
	imburg, IL 60173	•	Part 2: Creditors with Nonpriority Unsecured 0	Claims
		Last 4 digits of account number		
Name a	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
		Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Clair	ms
POB 1	. 2903 lk, VA 23541		Part 2: Creditors with Nonpriority Unsecured 0	Claims
NOTIO		Last 4 digits of account number	7050	
		On which entry in Part 1 or Part 2 did you	list the original creditor?	
		Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Clair	ms
	i30938 a, GA 30353-0938		Part 2: Creditors with Nonpriority Unsecured 0	Claims
Allani		Last 4 digits of account number		
Name o	nd Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
			f I Part 1: Creditors with Priority Unsecured Clair	ns
590 P	eter Jefferson Pkwy Ste 300		Part 2: Creditors with Nonpriority Unsecured (
Charle	ottesville, VA 22911-4628	Last 4 digits of account number	, 1 , 3 1 1 1 1 1 1 1	
		On which entry in Part 1 or Part 2 did you Line 4.3 of (<i>Check one</i>):	list the original creditor? Part 1: Creditors with Priority Unsecured Clair	ne
-p. u.i.	.,		- r art i. Oreanors with Friority Orisecured Cidii	110

Official Form 106 E/F

Debtor 1 Sharon Lee Poe		Case number (if know)				
20 Corporate Blvd Norfolk, VA 23502		■ Part 2: Creditors with Nonpriority Unsecured Claims				
NOTIOIR, VA 23302	Last 4 digits of account number					
lame and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
JVA Community Credit CU	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
POB 30049 Fampa, FL 33630-3049		■ Part 2: Creditors with Nonpriority Unsecured Claims				
anipa, FL 33030-3049	Last 4 digits of account number					
lame and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?				
Walmart/Synchrony Bank	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
POB 530927 Atlanta GA 30353-0927		Part 2: Creditors with Nonpriority Unsecured Claims				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 23,164.64
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 23,164.64

Last 4 digits of account number

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8/04/17 3:37PM

Fill in this infor					
Debtor 1	Sharon Lee Poe				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF VIRGINIA		
Case number					
(if known)					Check if this is an
				a	amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Abbington Crossing I
1000 Old Brook Rd
Charlottesville, VA 22901

State what the contract or lease is for
Residential lease

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				8/04/17 3:37PN
Fill in this i	nformation to identify you	ır case:		
Debtor 1	Sharon Lee Poe			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name	
United State	es Bankruptcy Court for the:	WESTERN DISTRICT	OF VIRGINIA	
Case number	er			☐ Check if this is an amended filing
	Form 106H ule H: Your Co	debtors		12/15
people are f ill it out, an	iling together, both are ed d number the entries in th	ually responsible for supp	olying correct informa n the Additional Page	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write
1. Do ye	ou have any codebtors? (f you are filing a joint case,	do not list either spouse	e as a codebtor.
■ No □ Yes				
Arizona No. 0	, California, Idaho, Louisian Go to line 3.	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash	ry? (Community property states and territories include ington, and Wisconsin.)
3. In Colu in line 2 Form 1 fill out	mn 1, list all of your code 2 again as a codebtor only	/ if that person is a guarar	spouse as a codebto	r if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 06G). Use Schedule D, Schedule E/F, or Schedule G to
	ame, Number, Street, City, State and	ZIP Code		Check all schedules that apply:
3.1 N	ame			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	umber Street ity	State	ZIP Code	
3.2 _N	ame			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line
	umber Street ity	State	ZIP Code	—

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Fill	in this information to identify you	ur case:							
	btor 1 Sharon L								
	btor 2				_				
Uni	ited States Bankruptcy Court for	the: WESTERN DISTRIC	T OF VIRGINIA		_				
	se number 		-			Check if this is: An amende A supplement	ed filing ent showing	g postpetition	chapter
\mathbf{O}	fficial Form 106l							ollowing date:	
	chedule I: Your In	come				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as posturing correct information. If youse. If you are separated and you a separate sheet to this for the Describe Employment 1:	ou are married and not fili your spouse is not filing w m. On the top of any addit	ing jointly, and your ith you, do not inclu	spouse ide infor	is living mation a	with you, incabout your sp	lude infori ouse. If m	mation about ore space is	t your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed	■ Employed			oyed		
		Employment status	□ Not employed			☐ Not e	mployed		
		Occupation	Admin Asst						
	Include part-time, seasonal, or self-employed work.	Employer's name	Resorts Compa	ny					
	Occupation may include stude or homemaker, if it applies.	ent Employer's address	Charlottesville,	VA					
		How long employed t	here? 20 year	s					
Par	rt 2: Give Details About I	Monthly Income							
	imate monthly income as of thuse unless you are separated.	e date you file this form. If	you have nothing to I	eport for	any line	, write \$0 in the	e space. In	clude your no	n-filing
	ou or your non-filing spouse have e space, attach a separate shee		ombine the information	n for all	employe	rs for that pers	on on the I	ines below. If	you need
					Fo	r Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	3,427.17	\$	N/A	
3.	Estimate and list monthly ov	vertime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	3,427.17	\$	N/A	

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Debto	or 1	Sharon Lee Poe	-	Case	number (<i>if known</i>)			
	0	vellere 4 have	4		Debtor 1		otor 2 or	
	Cop	by line 4 here	4.	\$	3,427.17	\$	N/A	
5.	List	all payroll deductions:						
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g.	\$ \$ \$ \$ \$	820.29 0.00 0.00 0.00 155.30 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ \$	975.59	\$	N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	2,451.58	\$	N/A	
		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	2,451.58 + \$_	N	\$2	,451.58
	Incliothe Other	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depen		•	ed in <i>Sch</i>	<i>edule J.</i> 11. +\$	0.00
		I the amount in the last column of line 10 to the amount in line 11. The reserve that amount on the Summary of Schedules and Statistical Summary of Certailies				a, if it	Combine	
13.	Do ; ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthly i	ncome

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						•		
Fill	in this informa	tion to identify yo	our case:					
Deb	otor 1	Sharon Lee I	Poe			Ch	eck if this is:	
Doh	otor 2						An amended filir	•
	ouse, if filing)							nowing postpetition chapter of the following date:
Unit	ted States Bankr	uptcy Court for the:	WESTE	RN DISTRICT OF VIR	GINIA		MM / DD / YYYY	<u> </u>
Cas	se number							
1	nown)							
0	fficial Fo	rm 106J						
		J: Your I	Exper	1989				12/1
Be info nu	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible. eded, atta y question	If two married people ch another sheet to the	e are filing together, b nis form. On the top o	ooth are ed of any add	qually responsible itional pages, wri	e for supplying correct te your name and case
Par 1.	t 1: Descr Is this a joir	ibe Your House	hold					
	■ No. Go to □ Yes. Doe	o line 2. s Debtor 2 live i	•	ate household?				
	⊔ Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expen	ses for Separate Hous	enola of D	eptor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.					_	_ □ Yes □ No
								Pes
								□ No
								□ Yes □ No
								□ Yes
3.	expenses of	enses include f people other t d your depende	han $_{oldsymbol{\square}}$	No Yes				
		ate Your Ongoi						
exp								Chapter 13 case to report p of the form and fill in the
the	value of sucl	n assistance an		government assistand cluded it on <i>Schedul</i> e			Your o	xpenses
(Ot	ficial Form 10	ы.)					Tour ex	хрепзез
4.		or home owners and any rent for the		ses for your residence r lot.	e. Include first mortgag	je 4.	\$	999.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
	4b. Prope	rty, homeowner's				4b.		38.00
				ipkeep expenses		4c.	\$	0.00
5.		owner's associat nortgage payme		dominium dues our residence, such as	home equity loans	4d. 5.	\$ \$	0.00 0.00
		5 5 1 7 7 1	. , .	,	1,		• -	

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Debto	Sharon Lee Poe	Case num	nber (if known)	
6. I	Jtilities:			
	Sa. Electricity, heat, natural gas	6a.	\$	100.00
(Sb. Water, sewer, garbage collection	6b.	\$	38.99
(Sc. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
(6d. Other Specify: Cell phone	6d.	\$	83.00
	Cable		\$	45.30
. 1	Food and housekeeping supplies		\$	350.00
	Childcare and children's education costs	8.	· -	0.00
	Clothing, laundry, and dry cleaning	9.	·	10.00
	Personal care products and services	10.	·	20.00
	Medical and dental expenses	11.	· —	25.00
	Fransportation. Include gas, maintenance, bus or train fare.			23.00
	Do not include car payments.	12.	\$	120.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	20.00
	Charitable contributions and religious donations	14.	\$	0.00
	nsurance.		-	
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	75.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		· —	
	Specify: Personal property taxes estimated	16.	\$	25.00
	nstallment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	249.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	7c. Other. Specify: Mattress payments	17c.	\$	25.00
	17d. Other. Specify:	17d.	· -	0.00
	Your payments of alimony, maintenance, and support that you did not report as		·	
٠. (deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	Other payments you make to support others who do not live with you.		\$	0.00
,	Specify:	19.		
). (Other real property expenses not included in lines 4 or 5 of this form or on School	edule I: Y	our Income.	
2	20a. Mortgages on other property	20a.	\$	0.00
2	20b. Real estate taxes	20b.	\$	0.00
2	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
2	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
2	20e. Homeowner's association or condominium dues	20e.	\$	0.00
l. (Other: Specify: Pet food, supplies, medication, vet bills	21.	+\$	155.00
	Emergencies		+\$	50.00
	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	2,428.29
2	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,428.29
. 4	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	2 454 50
	, ,		·	2,451.58
4	23b. Copy your monthly expenses from line 22c above.	23b.	-φ	2,428.29
,	23c. Subtract your monthly expenses from your monthly income.			
4	The result is your <i>monthly net income</i> .	23c.	\$	23.29
			L	
4. I	Do you expect an increase or decrease in your expenses within the year after yo	ou file thi	s form?	
ı	For example, do you expect to finish paying for your car loan within the year or do you expect your r			se or decrease because of a
	nodification to the terms of your mortgage?			
	No.			

Explain here: Pets are old and are on medication for issues, fleas, heartworms, which is expensive. One dog has skin allergy to food.

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Fill in this info	ormation to identify your	case:			
Debtor 1	Sharon Lee Poe				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	WESTERN DISTRICT (OF VIRGINIA		
Case number					
(if known)				_	ck if this is an
				amer	nded filing
Official For	rm 106Dec				
Declara	tion About a	n Individual	Debtor's Sched	lules	12/15
f two married _l	people are filing togethe	r, both are equally respo	nsible for supplying correct in	formation.	
			or amended schedules. Maki		
	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 1		ruptcy case can result in fines	s up to \$250,000, or imprison	ment for up to 20
cars, or botti.	10 0.0.0. 33 102, 1041,	1010, una 0071.			
Si	gn Below				
Did you p	pay or agree to pay some	one who is NOT an attor	ney to help you fill out bankru	ptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition	
				Declaration, and Signature	(Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed with	this declaration and	
X /s/ Sh	naron Lee Poe		X		
Share	on Lee Poe		Signature of Debtor	· 2	
Signat	ture of Debtor 1				
Date	August 4, 2017		Date		

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Fill	in this information to identify yo	our case:			
De	btor 1 Sharon Lee Po	e			
_	First Name	Middle Name	Last Name		
	btor 2 puse if, filing) First Name	Middle Name	Last Name		
Un	ited States Bankruptcy Court for the	e: WESTERN DISTRICT OF	- VIRGINIA		
	nou Grando Barini aproj Godini ioi ani			 -	
	se number			-	Check if this is an mended filing
St Be	ficial Form 107 atement of Financial as complete and accurate as pos	sible. If two married people a	are filing together, both are	e equally responsible for su	
nun	What is your current marital sta	estion. //arital Status and Where You	·	y additional pages, write yo	ur name and case
_	Not married				
2.	During the last 3 years, have yo	u lived anywhere other than	where you live now?		
	□ No■ Yes. List all of the places you	u lived in the last 3 years. Do n	ot include where you live nov	v.	
	Debtor 1 Prior Address:	Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
	1133 Wolf Trap Rd Charlottesville, VA 22911	From-To: 2011 - 2016	☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:
	Within the last 8 years, did you es and territories include Arizona, C No Yes. Make sure you fill out S Explain the Sources of Yo	California, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	, , ,	
4.	Did you have any income from 6 Fill in the total amount of income y If you are filing a joint case and you	you received from all jobs and	all businesses, including par	t-time activities.	endar years?
	□ No■ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	om January 1 of current year unti date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$23,987.68	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

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Deptor 1	Snaron Lee Po	oe		Cas	e number (if known)		
			ebtor 1		Debtor 2		
				O			Ouere imperse
		_	check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2016)			■ Wages, commissions, onuses, tips	\$33,850.00	☐ Wages, combonuses, tips	imissions,	
			Operating a business		☐ Operating a	business	
	endar year befo to December 31	2015 \	■ Wages, commissions, onuses, tips	\$29,156.00	☐ Wages, combonuses, tips	ımissions,	
			Operating a business		☐ Operating a	business	
List eac	ch source and the	e gross income	,	tely. Do not include income Gross income from	•	ne 4.	under Debtor 1. Gross income
		_	escribe below.	each source (before deductions and exclusions)	Describe below		(before deductions and exclusions)
Part 3:	ist Certain Payı	nents You Ma	ade Before You Filed for	Bankruptcy			
	her Debtor 1's o	r Debtor 2's o	debts primarily consume	debts? Imer debts. Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by ar
	During the 9	0 davs before	vou filed for bankruptcy, di	d you pay any creditor a tota	al of \$6.425* or mo	ore?	
	_ `	Go to line 7.	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , ,		
	☐ Yes	paid that credit	tor. Do not include paymen	d a total of \$6,425* or more			
			yments to an attorney for th n 4/01/19 and every 3 year	s after that for cases filed or	or after the date	of adjustmen	t.
■ Ye			ooth have primarily consu you filed for bankruptcy, di	imer debts. d you pay any creditor a tota	al of \$600 or more	?	
	□ No.	Go to line 7.					
	■ Yes	List below each		d a total of \$600 or more an bligations, such as child sup			
Credit	or's Name and	Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for
None				\$0.00	\$0.00	☐ Mortgag ☐ Car ☐ Credit C ☐ Loan Re ☐ Suppliel ☐ Other	Card

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Debi	or 1 Snaron Lee Poe		Cas	e number (<i>if known</i>)		
i	Within 1 year before you filed for bankruptour linsiders include your relatives; any general pactorporations of which you are an officer, direct including one for a business you operate as a support and alimony.	ortners; relatives of any gen tor, person in control, or ov	neral partners; partner or vner of 20% or more	erships of which you of their voting se	ou are a genera curities; and an	al partner; y managing agent,
	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	this payment
i	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on a	account of a de	ebt that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for to	this payment tor's name
Part	4: Identify Legal Actions, Repossession	ns, and Foreclosures				
	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
	Portfolio Recovery v Sharon Poe Case No GV 17-002421-00	Warrant in Debt (Settlement Order)	Albemarle Gen 501 E Jeffersor Charlottesville,	n St	□ Pending□ On appeal■ Concluded	
					Settled 5/2 date 6/8/20	2/17; hearing 117
	Within 1 year before you filed for bankrupte. Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			oreclosed, garni	shed, attached	I, seized, or levied? Value of the property
i	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		luding a bank or fir	nancial institutio	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
•	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possessi			efit of creditors, a

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Debtor 1 Sharon Lee Poe			Case number (if known)		
	-				
Par	t 5: List Certain Gifts and Contributions	S			
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No				
	☐ Yes. Fill in the details for each gift.				
	Gifts with a total value of more than \$600 per person		Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No No No No No No No No No N				
	Yes. Fill in the details for each gift or contribution.				Value
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details.				
			ibe any insurance coverage for the loss	Date of your	Value of property
	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		loss	lost	
Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.				
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Alexis I Crow, VSB 27042 684 Berkmar Circle Charlottesville, VA 22901 alexis@alexiscrowlaw.com		\$675 legal fee; \$335 court filing fee; 2 x courses est \$28 paid directly to vendor	8/4/2017	\$1,010.00
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.				
	No No				
	Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Sharon Lee Poe Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and value of property transferred		Describe any property or payments received or debts paid in exchange		Date transfer was made	
	Person's relationship to you						
	Colonial Auto Charlottesville, VA				12/2016		
	None						
 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust of beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. 				d trust or similar device (of which you are a		
	Name of trust	Description and value of the	proper	ty trans	ferred	Date Transfer was	
made					made		
Par	rt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit Boxes, and	l Stora	ige Unit	s		
 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, close sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokera houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 							
		ast 4 digits of Type of account number instrumen		or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	■ No						
	☐ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	De	scribe the contents		Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your home withi	n 1 yea	ar befor	e you filed for bankrupto	y?	
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?	
Par	rt 9: Identify Property You Hold or Control fo	r Someone Else					
23.	Do you hold or control any property that some for someone. No Yes. Fill in the details.		perty y	ou borr	owed from, are storing f	or, or hold in trust	
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe 1	the property	Value	

Case number (if known)

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Debtor 1 **Sharon Lee Poe**

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.							
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							
Rep	port all notices, releases, and proceedings the	nat you know about, regardless of when	they occurred.					
24.	. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of ■ No □ Yes. Fill in the details.	f any release of hazardous material?						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Pai	rt 11: Give Details About Your Business or	Connections to Any Business						
27.	Within 4 years before you filed for bankrup	tcy, did you own a business or have an	y of the following connections to a	ny business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing executive of a corporation							
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	No. None of the above applies. Go to	No. None of the above applies. Go to Part 12.						
	☐ Yes. Check all that apply above and fil	II in the details below for each business	i.					
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security					
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed					

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Debtor 1 Sharon Lee Poe Case number (if known)

28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name	Date Issued	

Official Form 107

Address (Number, Street, City, State and ZIP Code) Case 17-61524 Doc 1 Filed 08/04/17 Entered 08/04/17 15:40:37 Desc Main Document Page 40 of 54

8/04/17 3:37PM Debtor 1 Sharon Lee Poe Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sharon Lee Poe Signature of Debtor 2 **Sharon Lee Poe** Signature of Debtor 1 Date Date August 4, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

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Fill in this infor	mation to identify your	case:			
Debtor 1	Sharon Lee Poe	ACT III AN			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DIST	RICT OF VIRGINIA		
Case number _ (if known)					☐ Check if this is an amended filing
Official Fo Stateme r		n for Indiv	riduals Filing Under	· Chapter	· 7 12/15
creditors have	ividual filing under cha e claims secured by yo	ur property, or			
You must file thi	ever is earlier, unless th	ithin 30 days after	ot expired. you file your bankruptcy petition or e time for cause. You must also sen		
	eople are filing togethe	r in a joint case, bo	oth are equally responsible for suppl	lying correct info	ormation. Both debtors must
write y	and accurate as possib our name and case nur our Creditors Who Hav	nber (if known).	s needed, attach a separate sheet to	this form. On th	ne top of any additional pages,
	ors that you listed in Pa		c: Creditors Who Have Claims Secur	ed by Property (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the secures a debt?	e property that	Did you claim the property as exempt on Schedule C?
Creditor's C	Capital One Auto		☐ Surrender the property. ☐ Retain the property and redeem		■ No
Description of		a 28,000	☐ Retain the property and enter into Reaffirmation Agreement.	o a	☐ Yes
property securing debt:	miles Albemarle County		■ Retain the property and [explain]	:	
-	assessed value: \$ Location: 788 Old Charlottesville VA	Brook Road,	Retain and pay		
Creditor's S name:	syncb/Mattress Ware	house	☐ Surrender the property.☐ Retain the property and redeem	it.	■ No
Description of	Mattress		☐ Retain the property and enter into Reaffirmation Agreement.	o a	☐ Yes
property securing debt:	Location: 788 Old Charlottesville VA		Retain the property and [explain] Retain and pay	:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Official Form 108

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Debtor 1	Sharon Lee Poe	Case number (if known)	
Describe y	our unexpired personal property leases		Will the lease be assumed?
Lessor's na Description Property:			□ No □ Yes
Lessor's na Description Property:			□ No □ Yes
Lessor's na Description Property:			□ No □ Yes
Lessor's na Description Property:			□ No □ Yes
Lessor's na Description Property:			□ No □ Yes
Lessor's na Description Property:			□ No □ Yes
Lessor's na Description Property:			□ No □ Yes

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Deb	otor 1 Sharon Lee Poe	Case number (if known)
Part	t 3: Sign Below	
	er penalty of perjury, I declare that I have indicated my inte perty that is subject to an unexpired lease.	ention about any property of my estate that secures a debt and any personal
Χ	/s/ Sharon Lee Poe	X
	Sharon Lee Poe	Signature of Debtor 2
	Signature of Debtor 1	
	Date August 4, 2017	Date

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Case number Case C	Fill in	this infor	nation to identify your case:		Oh	and the second second	Parata d'a dela Carre	in Fame
Debtor 2 Ciscose, if firing Ciscose, if							directed in this form and	In Form
United States Bankruptcy Courl for the: Western District of Virginia Calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2). 3. The Means Test does not apply now because of qualified military service but it could apply later. Check if this is an amended filing Check if this is an amended filing Check if this is an amended fil	Debti	or 1	Snaron Lee Poe					
United States Bankruptcy Court for the: Western District of Virginia Case number (If throws) Case number Case number					'	1. There is no pres	sumption of abuse	
Case number Calculation (Official Form 122A - 1) Check if this is an amended filing Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income 12/15 B as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach is sparate sheat to this form, include the line number to which the additional information applies. On the top of any additional pages, write your mans and caus separates theat to this form, include the line number to which the additional information applies. On the top of any additional pages, write your mans and caus exparates sheat to this form, include the line number to which the additional information applies. On the top of any additional pages, write your mans and caus exparates the total to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your mans and caus exparates the provided of the page and the pag			Rankruptov Court for the Wastern District of	Virginia	1	☐ 2. The calculation	to determine if a presur	nption of abuse
Official Form 122A - 1 Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If wo married people are filing together, both are equally responsible for being accurate. If more space is needed, attain life from the papelles. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying nilitary service, complete and file Scientement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-15upp) with this form. 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is NOT filing with you. Fill out both Columns A and B, lines 2-11. Married and your spouse is NOT filing with you. Tou and your spouse are: Ulving separately or are legally separated. Fill out Column A, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11. Living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(f)(5). Fill in the exemps emothly income that your ceivouse are legally separated. Fill out both Column A, lines 2-11. In or compile. By the separated of the present of the pr	Office	u States i	Mestern District of	viigiilia		applies will be r	nade under Chapter 7 I	
Consider the services of the s					.	_	,	
Chapter 7 Statement of Your Current Monthly Income 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your mane and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)/2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income 1. What is your marital and filing status? Check one only. Not married. Fill out Column A, lines 2-11. Married and your spouse is NOT filing with you. Fill out both Columns A and B, lines 2-11. Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11. Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of parityr that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test recurrements. 11 U.S.C. § 70(F)(F)(B). Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A), For example, if you are fulling on September 15, the 6-month pend would be Maint's 1 through August 3.1 if the sameur valued during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same renal property, put the income from that property in one column only. If you have nothing to report or any line, write 50 in the space. 2. Your g	(II KNOV	WII)						
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, write your name and case includes a sheet of this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case includes a sheet of this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case includes a sheet of the page o						☐ Check if this is a	n amended filing	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, write your name and case includes a sheet of this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case includes a sheet of this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case includes a sheet of the page o	Offi	icial F	orm 122A - 1				3	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach separate sheet to this form, include the line number to which the additional information applies. On the top of any additional pages, wire your name and case number (if known), if you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form. Part 1: Calculate Your Current Monthly Income I. What is your marital and filing status? Check one only. Not married, Fill out Column A, lines 2-11. Married and your spouse is NOT filling with you. Fill out both Columns A and B, lines 2-11. Living in the same household and are not legally separated. Fill out both Columns A incompanity of perjury that you and your spouse are legally separated for lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated under norbankruptcy law that applies or that you and your spouse are legally separated. Fill the free sequence of the fill of				rent Mo	nthly Inc	ome		10/15
separates sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known), if you believe that you are exempted from a presumption of abuse because you do not have princip consumer doths or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.		арісі	7 Statement of Tour Gui	CITE IVIO	intility into			12/13
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Soloo Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Soloo Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Soloo Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Soloo Debtor 1	Part 1. Fill 10 ^o 6 n	what is y Not ma Not ma Marrie Marrie Livin pen livir I in the ave	complete and file Statement of Exemption from Proceediculate Your Current Monthly Income our marital and filing status? Check one on arried. Fill out Column A, lines 2-11. It d and your spouse is filing with you. Fill out d and your spouse is NOT filing with you. You in gin the same household and are not legang separately or are legally separated. Fill of alty of perjury that you and your spouse are legang apart for reasons that do not include evading rage monthly income that you received from all so example, if you are filing on September 15, the 6-more the income for all 6 months and divide the total by 6.	ly. It both Column You and your Ily separated. The gally separated by the Means The separated would fill in the result.	s A and B, lines spouse are: Fill out both Co lines 2-11; do no d under nonbar est requirement during the 6 full r be March 1 throug Do not include an	2-11. Jumns A and B, lines of fill out Column B. B kruptcy law that applis. 11 U.S.C § 707(b)(months before you file the August 31. If the amount income amount more the supplier of the supplier of the august 31. If the amount income amount more the supplier of the supp	2-11. y checking this box, you less or that you and your 7)(B). his bankruptcy case. 11 Unit of your monthly income in an once. For example, if b	u declare under spouse are J.S.C. § varied during the
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ Debtor 1 Gross receipts (before all deductions) Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Soloo Ocopy here -> \$ 0.00 \$ Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Soloo Ocopy here -> \$ Oc	trie	same rema	a property, put the income from that property in one c	Juliii only. Il yo	u have nothing to	Column A	Column B Debtor 2 or	
all payroll deductions). 3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Solution Debtor 1 Gross receipts (before all deductions) Solution Debtor 1 Gross receipts (before all deductions) Solution Ordinary and necessary operating expenses Solution Sol	_	Va a		nd commics	iana (h.sfa		non-filing spouse	
Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Solution Debtor 1 Gross receipts (before all deductions) Ond Ordinary and necessary operating expenses Solution Ond Ond Ond Ond Ond Ond Ond O		_		ina commissi	ions (before	\$ 3,427.17	\$	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ Debtor 1 Gross receipts (before all deductions) Formula and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Solution Ond Ond Ond Ond Ond Ond Ond O		•		payments from	a spouse if	\$ 0.00	\$	
5. Net income from operating a business, profession, or farm Debtor 1 Gross receipts (before all deductions) \$ 0.00 Ordinary and necessary operating expenses -\$ 0.00 Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) \$ 0.00 Ordinary and necessary operating expenses -\$ 0.00		of you or from an u and room	your dependents, including child support. married partner, members of your household mates. Include regular contributions from a sp	Include regula , your depende	er contributions ents, parents,	\$ 0.00	\$	
Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ O.00 Copy here -> \$ O.00 S Net income from rental and other real property Gross receipts (before all deductions) Ordinary and necessary operating expenses S O.00 Copy here -> \$ O.00 S O.00 Copy here -> \$ O.00								
Ordinary and necessary operating expenses Net monthly income from a business, profession, or farm \$ O.00 Copy here -> \$ O.00 S Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses -\$ O.00 Copy here -> \$ O.00 S O.00 Occupancy Debtor 1					otor 1			
Net monthly income from a business, profession, or farm \$ 0.00 Copy here -> \$ 0.00 \$ 6. Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses -\$ 0.00					-			
6. Net income from rental and other real property Debtor 1 Gross receipts (before all deductions) Ordinary and necessary operating expenses Debtor 1 \$ 0.00 -\$ 0.00		•	, , , , ,		Camu hara	Φ 0.00	¢	
Gross receipts (before all deductions) Ordinary and necessary operating expenses Debtor 1 \$ 0.00 -\$ 0.00				n \$	Copy nere ->	\$ 0.00	\$	
Gross receipts (before all deductions) Ordinary and necessary operating expenses \$\begin{array}{c} 0.00 \\ 0.00 \\ \end{array}\$ \$\delta 0.00 \\ 0.00 \\ \end{array}\$	6.	net incon	ne from rental and other real property	Del	otor 1			
Ordinary and necessary operating expenses -\$ 0.00		Gross res	oints (hoforo all doductions)					
				·	-			
				0.00	Copy here ->	\$ 0.00	\$	

0.00

\$

\$

7. Interest, dividends, and royalties

Debto	r1 S	haron Lee Poe			Case number	(if known)			
					Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unem	ployment compensation			\$	0.00	\$		
		enter the amount if you contend that the amoun the Social Security Act. Instead, list it here:	t received was a bene	fit					
	For	*	0.0	00_					
		your spouse \$							
	benefit	on or retirement income. Do not include any and under the Social Security Act.			\$	0.00	\$		
10.	Do not receive	e from all other sources not listed above. Specinclude any benefits received under the Social Section as a victim of a war crime, a crime against hurtic terrorism. If necessary, list other sources on allow.	Security Act or paymer manity, or internationa	nts I or					
		•			\$	0.00	\$		
					\$	0.00	\$		
		Total amounts from separate pages, if any.		+	\$	0.00	\$		
11.		ate your total current monthly income. Add lir olumn. Then add the total for Column A to the to		\$	3,427.17	+ -		= \$	3,427.17
						J L		Total come	urrent monthly
Part	2:	Determine Whether the Means Test Applies t	o You						
12.	Calcul	ate your current monthly income for the year.	. Follow these steps:						
	12a. C	opy your total current monthly income from line	11		Сору	/ line 11 l	nere=>	\$	3,427.17
	M	lultiply by 12 (the number of months in a year)						x 1	2
	12b. T	he result is your annual income for this part of th	e form				12b.	\$4	1,126.04
13.	Calcul	ate the median family income that applies to	you. Follow these step	os:					
	Fill in t	he state in which you live.	VA						
	Fill in t	he number of people in your household.	1						
	To find	he median family income for your state and size I a list of applicable median income amounts, go I form. This list may also be available at the bank	online using the link s	pecifie	d in the separ	ate instru	13. ctions	\$5	6,456.00
14.	How d	o the lines compare?							
	14a.	Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1, ch	neck bo	ox 1, There is	no presur	nption of abus	e.	
	14b.	☐ Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The p	presumption of	^f abuse is	determined by	/ Form 12	22A-2.
Part	3:	Sign Below							
	В	y signing here, I declare under penalty of perjury	that the information o	n this s	tatement and	in any att	achments is tr	ue and c	orrect.
	X	/s/ Sharon Lee Poe Sharon Lee Poe							
		Signature of Debtor 1							
		August 4, 2017 MM / DD / YYYY							
	If	you checked line 14a, do NOT fill out or file Forr	n 122A-2.						
	lf	you checked line 14b, fill out Form 122A-2 and f	ile it with this form.						

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-61524 Doc 1 Filed 08/04/17 Entered 08/04/17 15:40:37

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B2030 (Form 2030) (12/15) **United States Bankruptcy Court** Western District of Virginia

In r	In re Sharon Lee Poe	Case No.	
	Debtor(s)	Chapter	
	DISCLOSURE OF COMPENSATION OF ATTORY	NEY FOR DE	CBTOR(S)
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorner compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	r agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept	\$	675.00
	Prior to the filing of this statement I have received		675.00
	Balance Due	\$	0.00
2.	\$335.00 of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	■ Debtor □ Other (specify):		
4.	The source of compensation to be paid to me is:		
	■ Debtor □ Other (specify):		
5.	■ I have not agreed to share the above-disclosed compensation with any other person ur	nless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons wh copy of the agreement, together with a list of the names of the people sharing in the co		
6.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of	of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in detert b. Preparation and filing of any petition, schedules, statement of affairs and plan which n c. Representation of the debtor at the meeting of creditors and confirmation hearing, and d. [Other provisions as needed] 	nay be required;	
	Representation at ONE 341 meeting in Charlottesville (out of Char Preparation (not filing) of Homestead Deed (CLIENT WILL FILE); 3.		

By agreement with the debtor(s), the above-disclosed fee does not include the following service:

agreement between Attorney and Debtor(s).

1. Does NOT include real estate loan modifications/tax resolution (other than stay of levy) unless separately agreed and fee paid.

will be provided ONLY as indicated herein and agreed on signed Fee Sheet (if any) that will be incorporated by this reference into this contract. 5. This Compensation Statement and Fee Sheet (if any) constitute the entire

- 2. Does NOT include calling creditors pre- or post-petition unless violation of stay.
- 3. Does NOT include Motions to Quash/Stay unless separately agreed and fee paid.
- 4. Does NOT include lien avoidance unless separately agreed and fee paid.
- 5. Does NOT include reaffirmation or redemption of vehicle unless separately agreed and fee paid.
- 6. CONTRACT CLOSED AND SERVICES COMPLETED WHEN COURT CLOSES THE CASE.

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In re	Sharon Lee Poe	Case No.	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) (Continuation Sheet)						
	(Continuation Sheet) CERTIFICATION a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in /s/ Alexis I. Crow VSB Alexis I. Crow VSB #27042 Signature of Attorney					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in his bankruptcy proceeding.						
August 4, 2017	/s/ Alexis I. Crow VSB					
Date	Alexis I. Crow VSB #27042					
	Signature of Attorney					
	Alexis I. Crow, VSB #27042					
	684 Berkmar Circle					
	Charlottesville, VA 22901					
	(434) 295-5333 Fax: (434) 295-9529					
	alexis@alexiscrowlaw.com					
	Name of law firm					

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8/04/17 3:37PM

United States Bankruptcy Court Western District of Virginia

		western District or virginia		
In re	Sharon Lee Poe		Case No.	
		Debtor(s)	Chapter	7
	VFI	RIFICATION OF CREDITOR M	IATRIX	
	V ===			
he abo	ove-named Debtor hereby verifie	es that the attached list of creditors is true and cor	rect to the best	of his/her knowledge.
Date:	August 4, 2017	/s/ Sharon Lee Poe		
		Sharon Lee Poe		
		Signature of Debtor		

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Poe, Sharon -

ARS NATIONAL SERVICES POB 469046 ESCONDIDO, CA 92046-9046

CAPITAL ONE POB 30281 SALT LAKE CITY, UT 84130-0281

CAPITAL ONE AUTO 390 N DALLAS PKWY PLANO, TX 75093

CAPITAL ONE AUTO FIN POB 60511 CITY OF INDUSTRY, CA 91716-0511

GLASS MOUNTAIN CAPITAL 1930 THOREAU DRIVE #100 SCHAUMBURG, IL 60173

PORTFOLIO RECOVERY 120 CORPORATE BLVD NORFOLK, VA 23502

PORTFOLIO RECOVERY POB 12903 NORFOLK, VA 23541

RUS CREDIT CARDS/GECRB POB 530938 ATLANTA, GA 30353-0938

SENTARA MARTHA JEFF MED GRP 590 PETER JEFFERSON PKWY STE 300 CHARLOTTESVILLE, VA 22911-4628

SENTARA MARTHA JEFFERSON HOSP POB 759132 BALTIMORE, MD 21275-9132

SPRUILL, HACKWORTH ATTYS 120 CORPORATE BLVD NORFOLK, VA 23502 Poe, Sharon -

SYNCB/CARECREDIT POB 965036 ORLANDO, FL 32896-5036

SYNCB/MATTRESS WAREHOUSE POB 965036 ORLANDO, FL 32896

SYNCB/TJX CO PLCC POB 965015 ORLANDO, FL 32896

SYNCB/TOYSRUS POB 965001 ORLANDO, FL 32896

SYNCB/WALMART POB 965024 ORLANDO, FL 32896-5024

UVA COMMUNITY CREDIT CU POB 30049 TAMPA, FL 33630-3049

UVA COMMUNITY CREDIT UNION 3300 BERKMAR DRIVE CHARLOTTESVILLE, VA 22901

WALMART/SYNCHRONY BANK POB 530927 ATLANTA, GA 30353-0927